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**POWER OF ATTORNEY  
and  
CORRESPONDENCE ADDRESS  
INDICATION FORM**

Application Number	
Filing Date	
First Named Inventor	Hee Young Kim
Title	Method for Continuous..
Art Unit	
Examiner Name	
Attorney Docket Number	644P003

I hereby appoint:

☒ Practitioners associated with the Customer Number

OR

☒ Practitioner(s) named below:

Name	Registration Number
Kevin S. Lemack	32,579
Henry C. Nields	17,029
Robert C. Frame	54,104

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name					
Address	Nields & Lemack				
Address	176 E. Main Street - Suite 7				
City	Westboro	State	MA	Zip	01581
Country	U.S.A.				
Telephone	508-898-1818	Fax	508-898-2020		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Hee Young Kim
Signature	<i>Hee Young Kim</i>
Date	Aug. 21, 2004
Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 4 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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I hereby appoint:

☒ Practitioners associated with the Customer Number: 42754

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Kevin S. Lemack	32.579
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
<input checked="" type="checkbox"/> Firm or Individual Name					
Address	Nields & Lemack				
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## SIGNATURE of Applicant or Assignee of Record

Name	Yong Ki Park	
Signature		
Date	2004.8.31	
	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Kyung Koo Yoon
Signature	<i>[Signature]</i>
Date	Aug. 31, 2004
Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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First Named Inventor	Hee Young Kim
Title	Method for Continuous..
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Attorney Docket Number	644P003

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Hyung Sup Lim		
Signature	H.S. Lim		
Date	Aug. 31, 2004		
	Telephone		

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐

Declaration  
Submitted  
With Initial  
Filing

OR

☐

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

Attorney Docket Number

644P003

First Named Inventor

Hee Young Kim

COMPLETE IF KNOWN

Application Number

Filing Date

Art Unit

Examiner Name

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD FOR CONTINUOUS PREPARATION OF NANOMETER-SIZED  
HYDROUS ZIRCONIA SOL

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☒

was filed on (MM/DD/YYYY)

1 December 2003

as United States Application Number or PCT International

Application Number

PCT/KR03/02619

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
10-2003-14245	Korea	03/07/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1470 Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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# DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number. <u>42754</u> OR <input type="checkbox"/> Correspondence address below			
Name Niels & Lemack			
Address 176 E. Main Street - Suite 7			
City Westboro		State MA	ZIP 01581
Country U.S.A.	Telephone 508-898-1818	Fax 508-898-2020	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Hee Young		Family Name or Surname Kim	
Inventor's Signature <i>[Signature]</i>		Date Aug. 31, 2004	
Residence: City Yuseong-ku	State Daejeon	Country Republic of Korea	Citizenship KR
Mailing Address 101-203 Hanbit Apartment, Eoeun-dong			
City Yuseong-ku	State Daejeon	ZIP 305-755	Country KR
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Yong Ki		Family Name or Surname Park	
Inventor's Signature <i>[Signature]</i>		Date 2004.8.31	
Residence: City Yuseong-ku	State Daejeon	Country Republic of Korea	Citizenship KR
Mailing Address 119-302 Hanbit Apartment, Eoeun-dong			
City Yuseong-ku	State Daejeon	ZIP 305-755	Country KR
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

Please type a plus sign (+) inside this box



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PTO/SB/01 (03-01)

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# DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 3 of 3

Name of Additional Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Kyung Koo		Yoon	
Inventor's Signature		Date	
<i>[Signature]</i>		Aug. 31, 2004	
Residence: City	Yuseong-ku KR	State	Daejeon
		Country	KR
Citizenship KR			
Mailing Address 126-903 Hanbit Apartment, Eoeun-dong			
City	Yuseong-ku	State	Daejeon
		ZIP	305-755
		Country	Republic of Korea

Name of Additional Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Hyung Sup		Lim	
Inventor's Signature		Date	
<i>[Signature]</i>		Aug. 31, 2004	
Residence: City	Ansan KR	State	Kyungki-do
		Country	KR
Citizenship KR			
Mailing Address 218-401 Hanyang Apartment, Sunbu-dong 1086			
City	Ansan	State	Kyungki-do
		ZIP	425-140
		Country	Republic of Korea

Name of Additional Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
		Country	
Citizenship			
Mailing Address			
City		State	
		ZIP	
		Country	

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